



QPS Quality Dashboard

February 28, 2019



COOK COUNTY
HEALTH

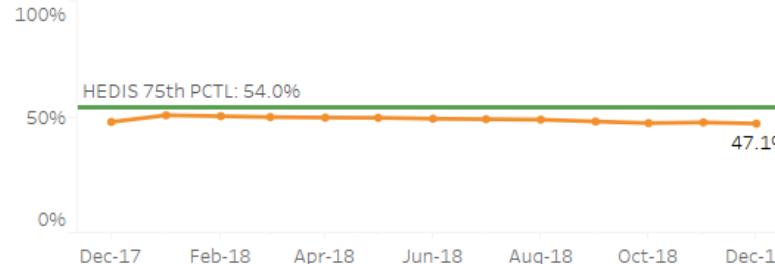


COOK COUNTY HEALTH

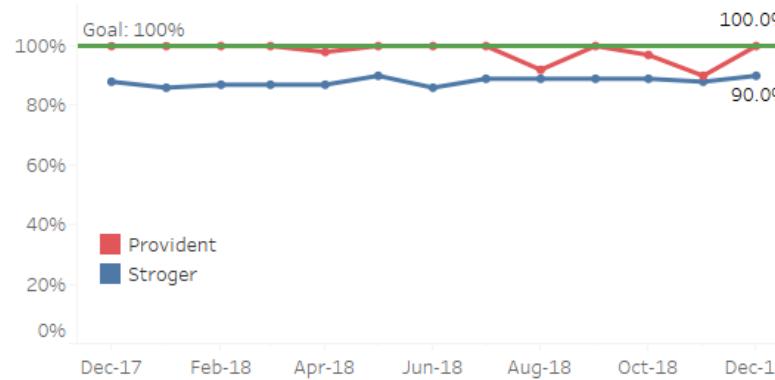
Quality
Dashboard
February 22, 2019

Health Outcomes

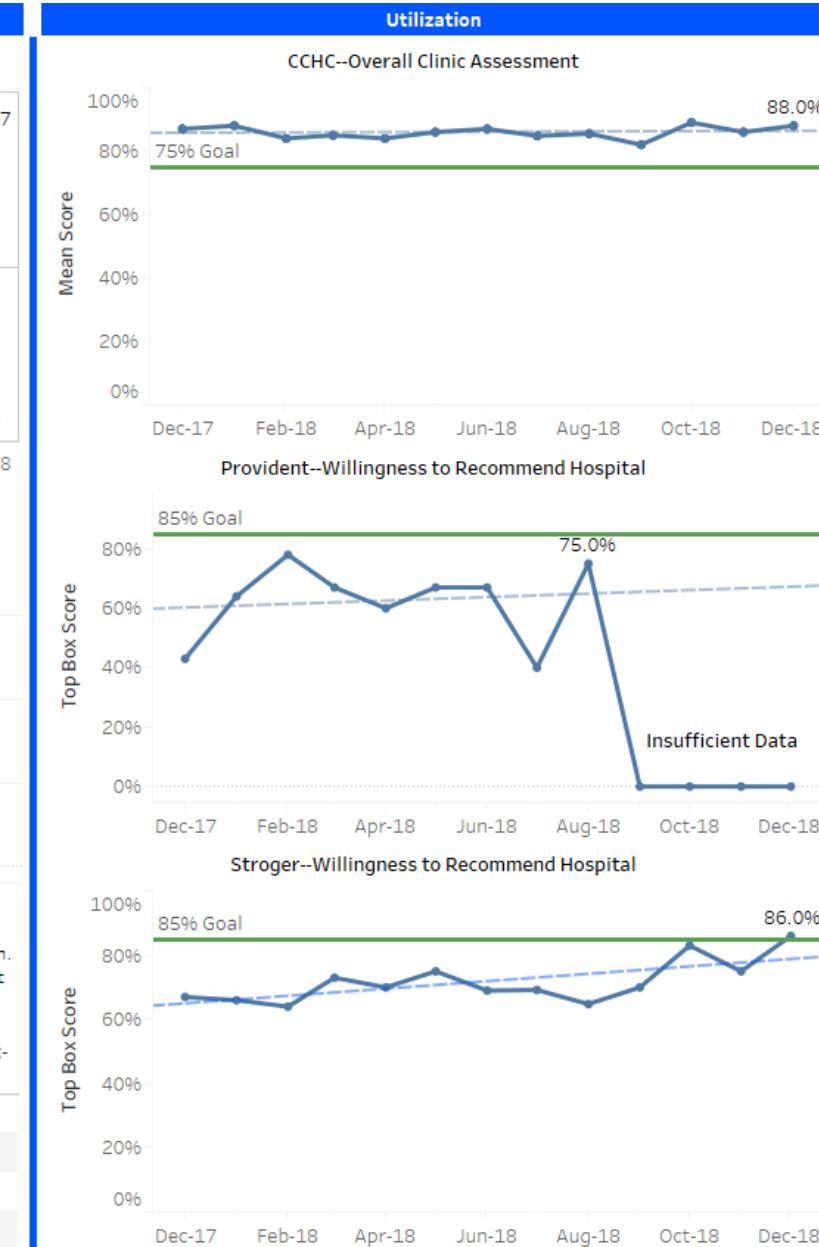
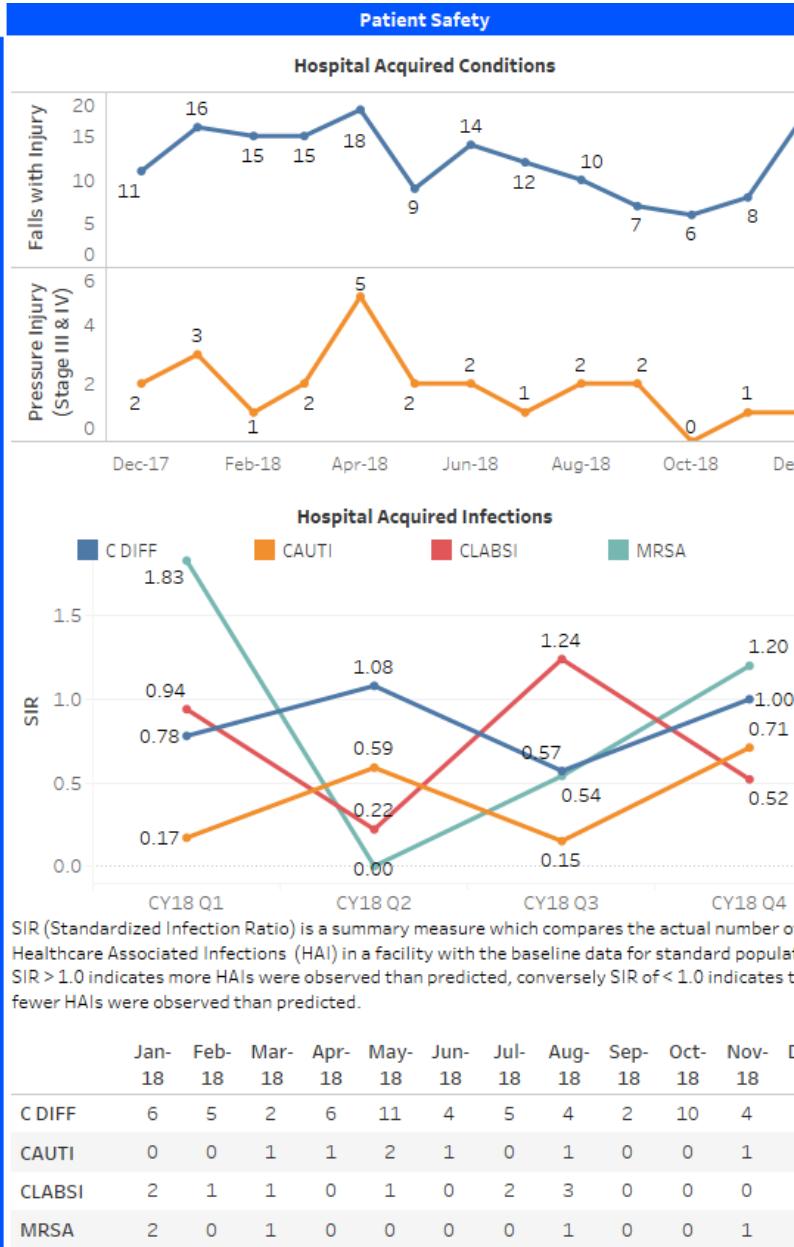
HEDIS - Diabetes Management: HbA1c < 8%



Core Measure - Venous Thromboembolism (VTE) Prevention

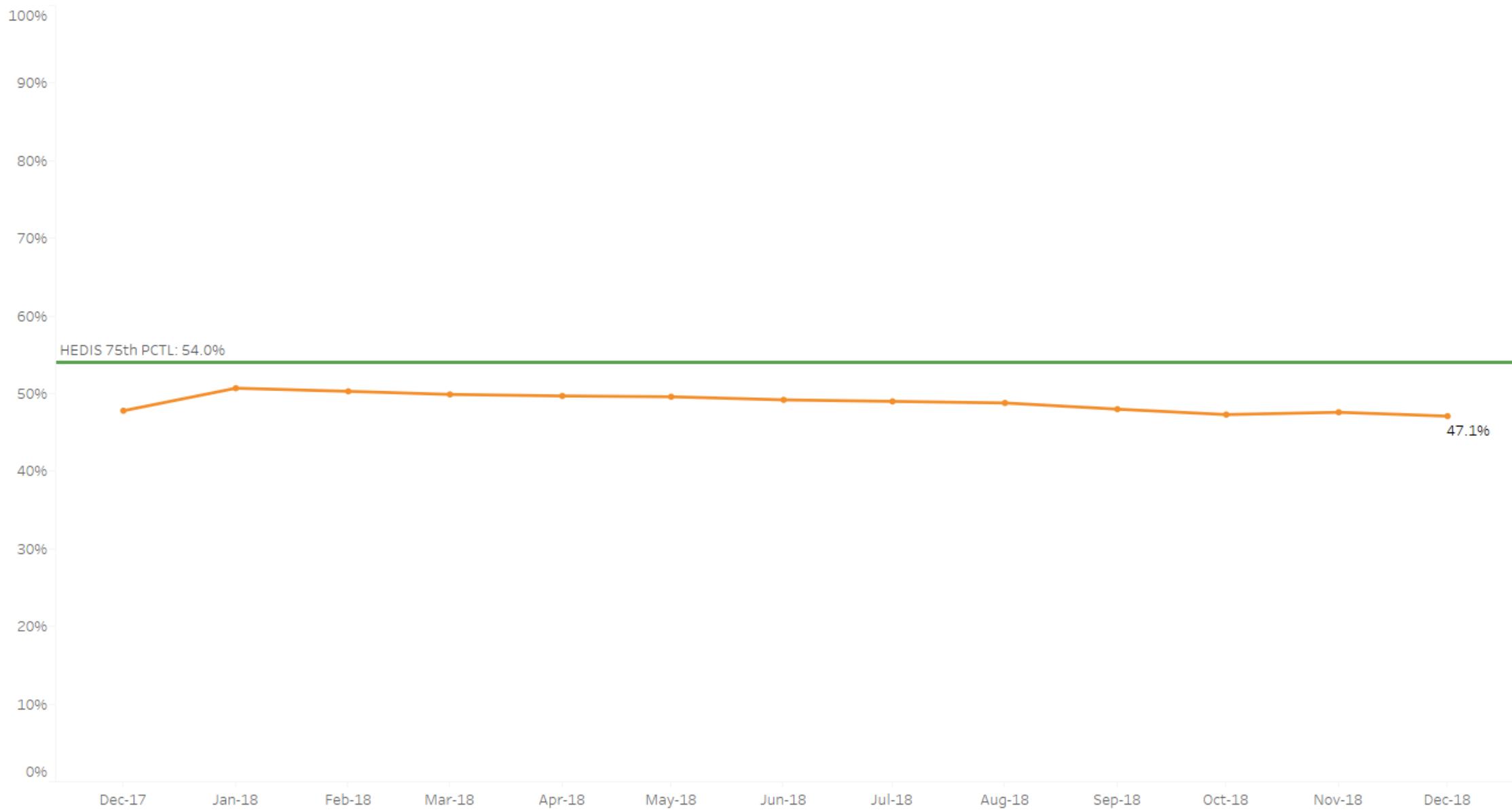


30 Day Readmission Rate

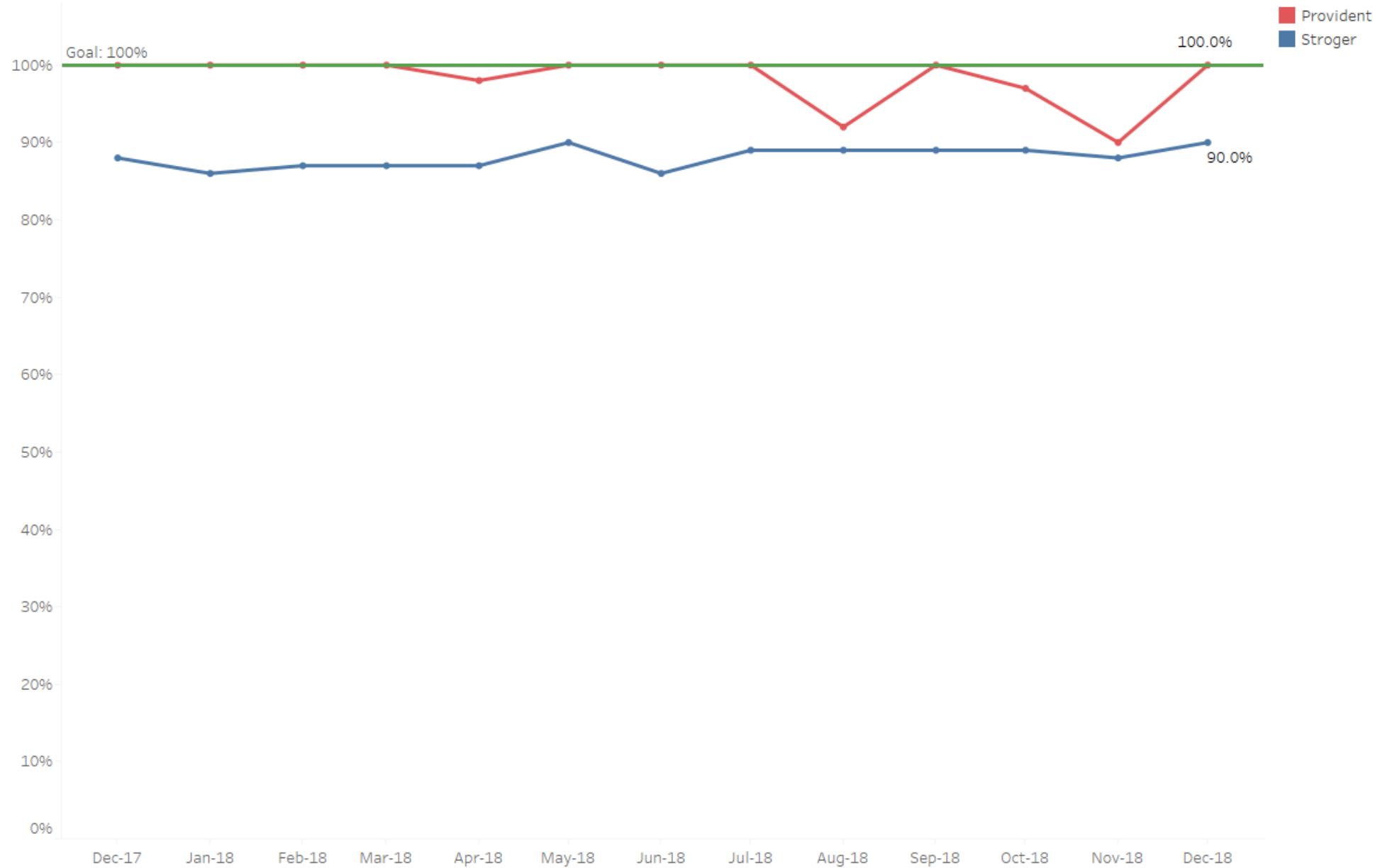


COOK COUNTY
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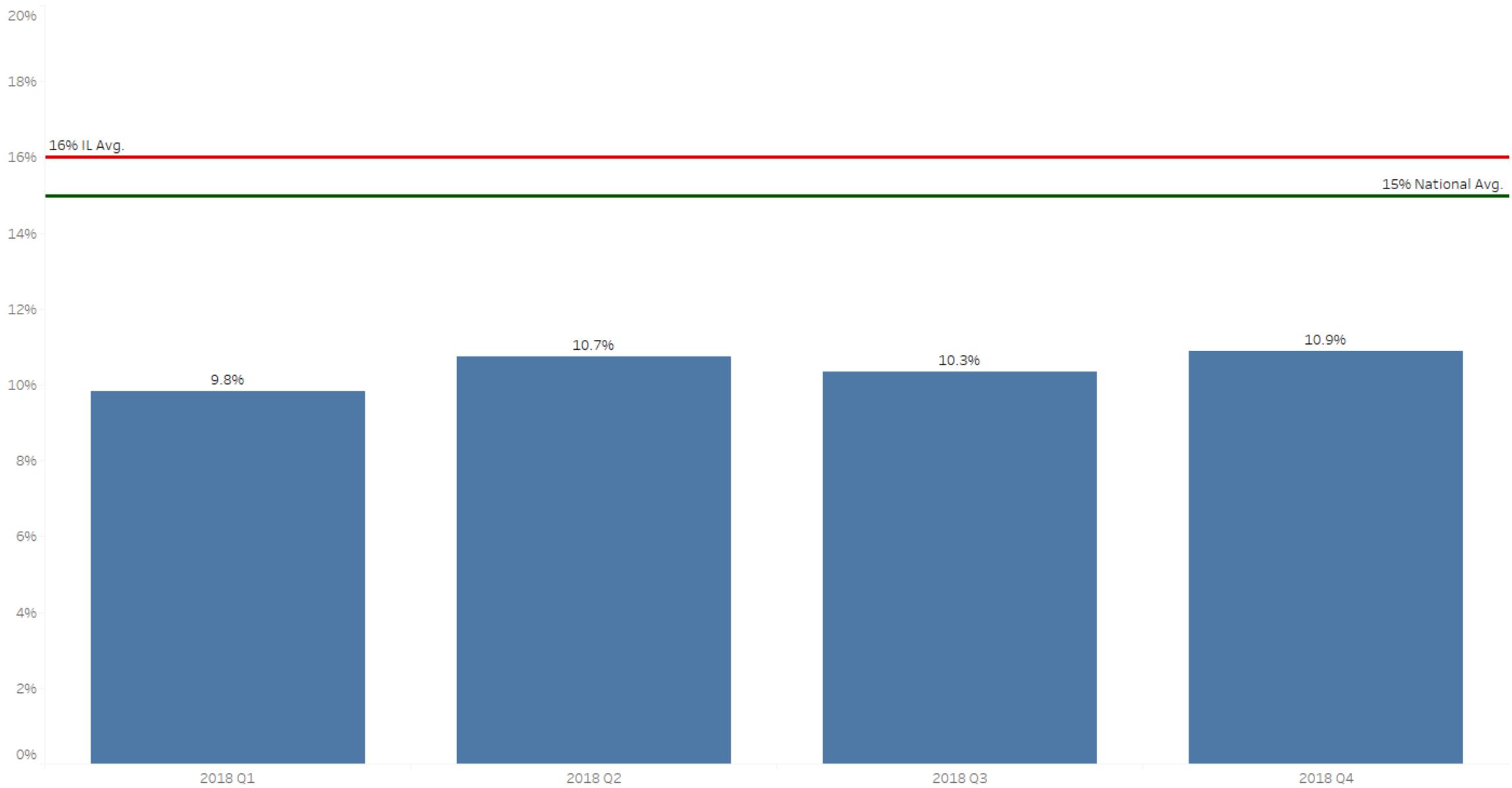
HEDIS - Diabetes Management: HbA1c < 8%



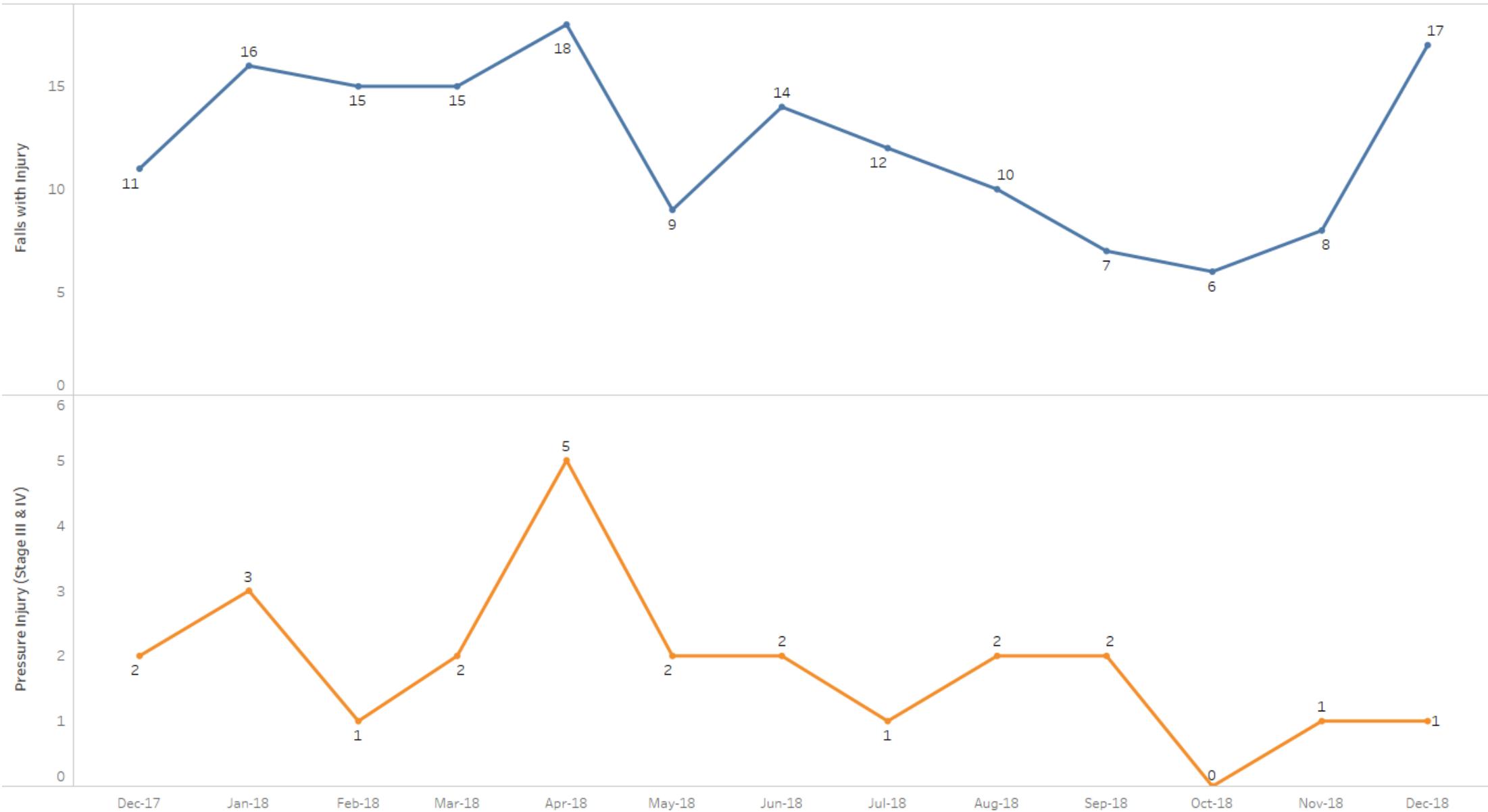
Core Measure - Venous Thromboembolism (VTE) Prevention



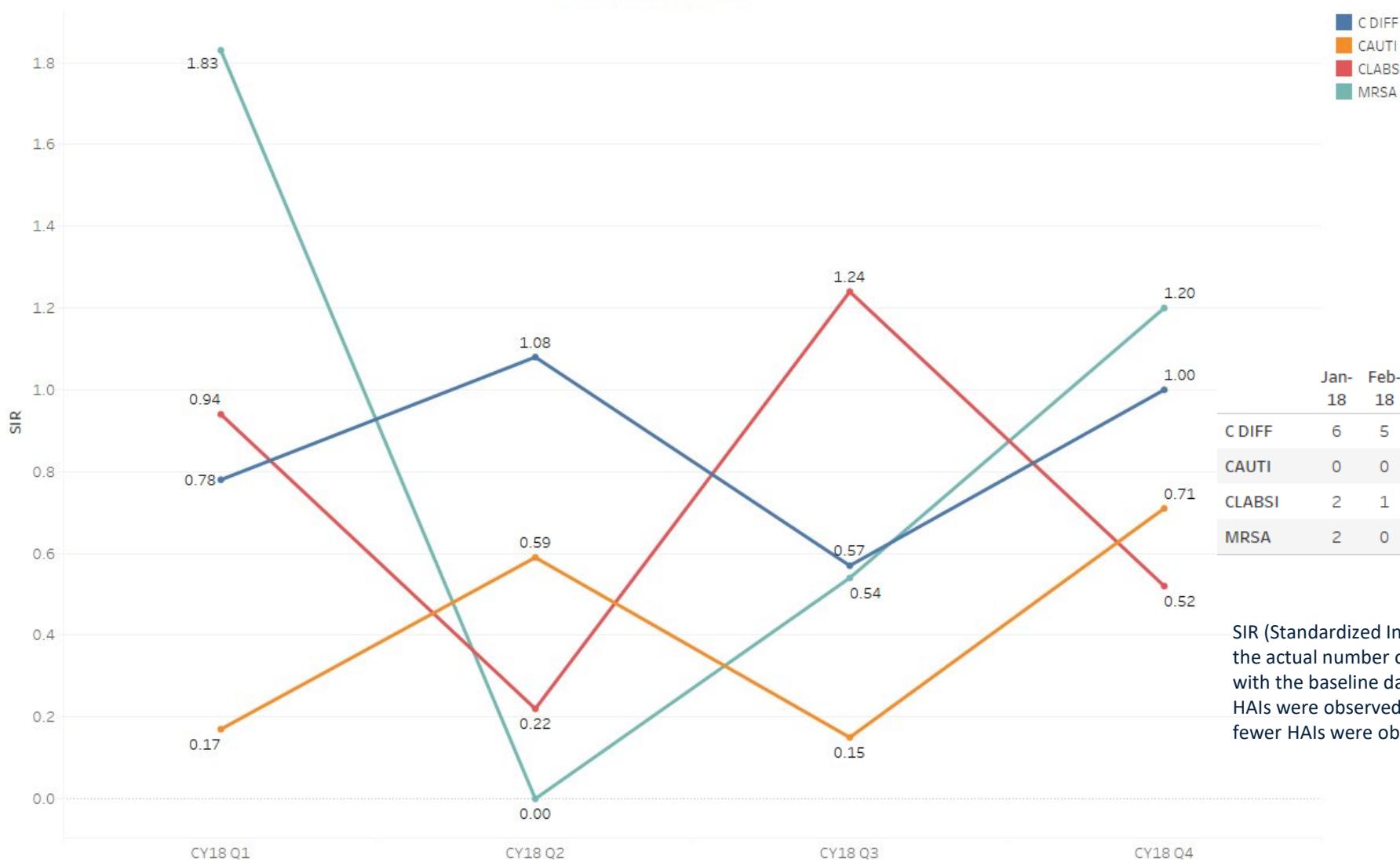
30 Day Readmission Rate



Hospital Acquired Conditions



Hospital Acquired Infections



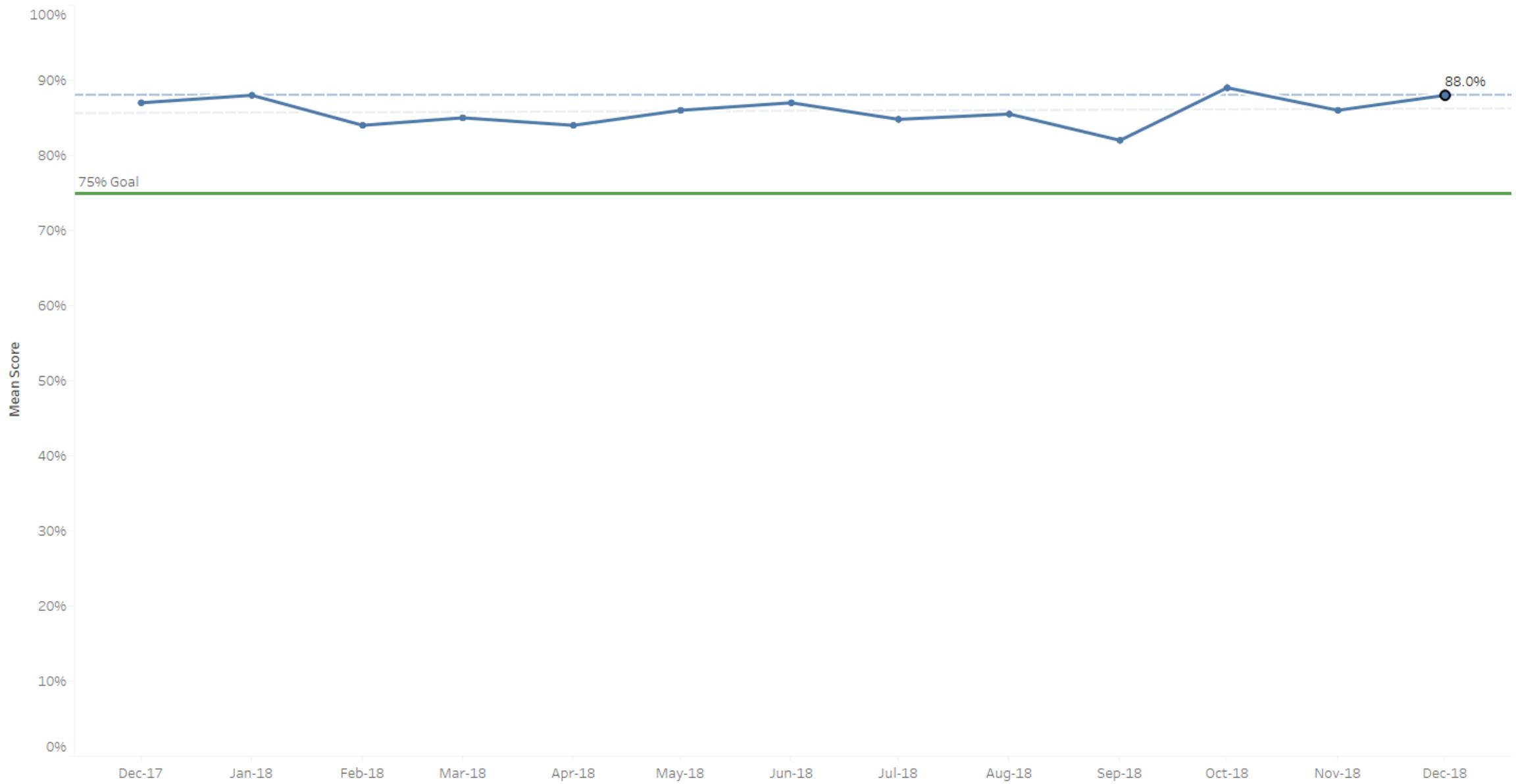
Hospital Acquired Infections

	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18
C DIFF	6	5	2	6	11	4	5	4	2	10	4	4
CAUTI	0	0	1	1	2	1	0	1	0	0	1	3
CLABSI	2	1	1	0	1	0	2	3	0	0	0	2
MRSA	2	0	1	0	0	0	0	1	0	0	1	0

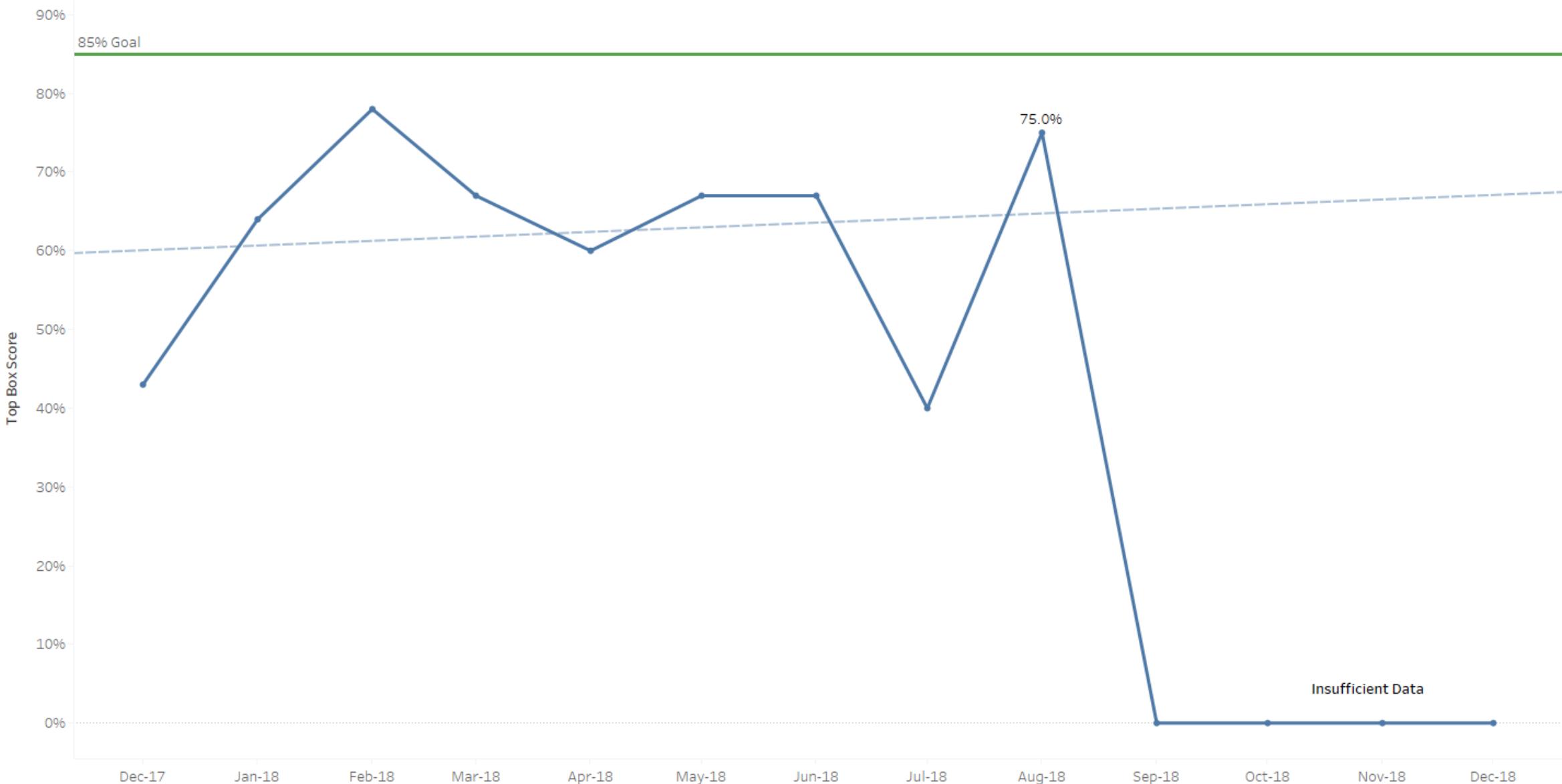
SIR (Standardized Infection Ratio) is a summary measure which compares the actual number of Healthcare Associated Infections (HAI) in a facility with the baseline data for standard population. SIR > 1.0 indicates more HAIs were observed than predicted, conversely SIR of < 1.0 indicates that fewer HAIs were observed than predicted.



CCHC--Overall Clinic Assessment



Provident--Willingness to Recommend Hospital



Stroger--Willingness to Recommend Hospital

